PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

Effective October 1, 2003

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			19					RATE	FEE	7	RATE	F	EE
FC	DR .		NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770	0.00
TOTAL CHARGEABLE CLAIMS			\ 9 minus 20=		*			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			ع, minus 3 =		*			X43=		OR	X86=		
ML	JLTIPLE DEPEI	NDENT CLAIM P	RESENT		<u>.</u>			+145=		OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2						•	TOTAL		OR	TOTAL	[,	Ü	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							OTHER THA						
AMENDMENTA	A	CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIC PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	TIO	DI- NAL E
	Total	. 19	Minus	- 6	<u> </u>	= 0		X\$ 9=		OR	X\$18=		
	Independent	l· A	Minus	***	<u>5</u>	= 0		X43=		OR	X86=		
<u> </u>	FIRST PRESE	NTATION OF MI	JUIPLE DEF	PENDENT	CLAIM		' [+145=		OR	+290=		
•								TOTAL ADDIT, FEE		OR	TOTAL ADDIT. FEE	1	>
					-								
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	,	HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	AD TION FE	NAL
	Total	*	Minus	**		=		X\$ 9= ·		OR	X\$18=		
	Independent	NTATION OF MI	Minus	ENDENT	CI AIM	=		X43=		OR	X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							<u> </u>	+145≐		OR	+290=		
•								TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colum		(Column 3)	-		٠				
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADI TION FE	VAL
	Total '	*	Minus	**		=	▎▐	X\$ 9=	-	OR	X\$18=		
	Independent	*	Minus	***		0	 	X43=		. 1	X86=		\dashv
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							7,10-		OR	7.00-		-
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.*								+145=		OR	+290=]
**If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR ,	TOTAL ODIT. FEE		
		mber Previously Pai ber Previously Paid					r foun	d in the app	ropriate box	in colu	umn 1.		l